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PATENT APPLICATION
10/808,949

5721

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Application of:

Robert Aigner

Serial No.:

10/808,949

Date Filed:

March 25, 2004

Examiner:

Anthony D. Tugbang

Group Art Unit:

3729

Title:

A Method of Producing a Piezoelectric Component

MAIL STOP AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

I hereby certify that this communication is being deposited with the United States Postal Service as Express Mail No. EV351262715US addressed to: Mail Stop Amendment, Commissioner for Patents, Washington, D.C. 20231, on May 6, 2005.

Angela Loding

Dear Sir:

RESPONSE TO OFFICE ACTION

In response to the Office Action, mailed February 8, 2005, Applicants respectfully submit the following amendments set forth below and request favorable action thereon.

Amendments to the Specification are on page 2 of this paper.

Amendments to Claims are reflected in the listing of claims which begins on page 4 of this paper.

Remarks/Arguments begin on page 11 of this paper.

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05/12/2005 WASHING 00000003 020383
01 FC:1202 450.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number:

10/808,949

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	30		
FOR		NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	30	minus 20 =	10
INDEPENDENT CLAIMS	2	minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT			<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Total	Minus	-- 30	= 9
	Independent	2	Minus	---	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>	

1,10

(Column 1) (Column 2) (Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Total	Minus	--	=
	Independent		Minus	---	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>	

(Column 1) (Column 2) (Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Total	Minus	--	=
	Independent		Minus	---	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY
TYPE OTHER THAN
OR SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	385.00	OR BASIC FEE	770.00
X\$ 9=		OR X\$18=	180
X43=		X86=	
+145=		+290=	
TOTAL		OR TOTAL	950

OTHER THAN
SMALL ENTITY OR SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	450
X43=		X86=	
+145=		+290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X43=		X86=	
+145=		+290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		X\$18=	
X43=		X86=	
+145=		+290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	